

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	US040048
	<b>First Named Inventor</b>	GERRIT HOLLEMANS
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	
	<b>Group Art Unit</b>	
	<b>Examiner Name</b>	

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND SYSTEM FOR DETERMINING THE TOPIC OF A CONVERSATION  
AND LOCATING AND PRESENTING RELATED CONTENT**

the specification of which (Title of the invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 01/20/2004 as United States Application Number or PCT International

Application Number 80/537,808 and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 3]

**Burden Hour Statement:** This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<b>24737</b>		OR <input type="checkbox"/> Correspondence address below	
PATENT TRADEMARK OFFICE							
Name <b>Philips Intellectual Property &amp; Standards</b>							
Address <b>345 Scarborough Road</b>							
P.O. Box 3001							
City <b>Briarcliff Manor</b>				State <b>NY</b>		ZIP <b>10510-8001</b>	
Country <b>USA</b>				Telephone <b>914-945-6000</b>		Fax <b>914-332-0615</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Josephus Hubertus</b> (first and middle [if any])				Family Name <b>EGGEN</b> or Surname			
Inventor's Signature <i>[Signature]</i>						Date <i>[Date]</i>	
Eindhoven Residence: City				State		The Netherlands Country	
The Netherlands Citizenship							
Baristraat 14 Mailing Address							
Eindhoven City				State		Zip <b>5632 TK</b> Country	
The Netherlands Country							
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <b>Gerrit</b> (first and middle [if any])				Family Name <b>HOLLEMANS</b> or Surname			
Inventor's Signature <i>[Signature]</i>						Date <i>19-5-2004</i>	
Eindhoven Residence: City				State		The Netherlands Country	
The Netherlands Citizenship							
Pennekert 20 Mailing Address							
Eindhoven City				State		Zip <b>5641 PZ</b> Country	
The Netherlands Country							
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							


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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: Bartel Marius (first and middle (if any))		Family Name or Surname: VAN DE SLUIS	
Inventor's Signature 		Date 19-5-2004	
Residence: City EINDHOVEN	State	Country THE NETHERLANDS	Citizenship THE NETHERLANDS
Mailing Address FREDERIKA VAN PRUISENWEG 13			
Mailing Address			
City EINDHOVEN	State	ZIP 5616 AT	Country THE NETHERLANDS
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname:	
(first and middle (if any))			
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship ANDS
Mailing Address			
City	State	Zip	Country
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Submitted With Initial  
Filing

OR

☐ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

**Attorney Docket Number** US040048**First Named Inventor** GERRIT HOLLEMANS**COMPLETE IF KNOWN**

Application Number

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Group Art Unit

Examiner Name

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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Bar Code Label

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OR ☐ Correspondence address below

PATENT TRADEMARK OFFICE

Name **Philips Intellectual Property & Standards**

Address **345 Scarborough Road  
P.O. Box 3001**

City **Briarcliff Manor**

State **NY**

ZIP **10510-8001**

Country **USA**

Telephone **914-945-6000**

Fax **914-332-0615**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name **Josephus Hubertus**  
(first and middle (if any))

Family Name **EGGEN**  
or Surname

Inventor's  
Signature 

Date **26-5-2004**

Eindhoven

State

The Netherlands

The Netherlands

Residence: City

Country

Citizenship

**Baristraat 14**  
Mailing Address

Eindhoven

State

Zip **5632 TK**

The Netherlands

City

Country

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name **Gerrit**  
(first and middle (if any))

Family Name **HOLLEMANS**  
or Surname

Inventor's  
Signature 

Date **26-5-2004**

Eindhoven

State

The Netherlands

The Netherlands

Residence: City

Country

Citizenship

**Pennekert 20**

Mailing Address

Eindhoven

State

5641 PZ

The Netherlands

City

Zip

Country

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Page 1 of 1

Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name: <b>Bartel Marinus</b> (first and middle [if any])		Family Name or Surname: <b>VAN DE SLUIS</b>	
Inventor's Signature		Date	
Residence: City <b>EINDHOVEN</b>	State	Country <b>THE NETHERLANDS</b>	Citizenship <b>THE NETHERLANDS</b>
Mailing Address <b>FREDERIKA VAN PRUISENWEG 13</b>			
Mailing Address			
City <b>EINDHOVEN</b>	State	ZIP <b>5616 AT</b>	Country <b>THE NETHERLANDS</b>
Name of Additional Joint Inventor, If any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
Residence: City	State	Country	Citizenship <b>ANDS</b>
Mailing Address			
City	State	Zip	Country
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